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Viamed Ltd



Delivery Address

Angkor Hospital for Children
Phreah Sangreach Tep Vong Rd And
Umchhay St Mondal 1 PO BOX 50
Sangkat Svay Dangkum
Siem Reap
171202
Cambodia

Invoice Address

Angkor Hospital For Children
Phreah Sangreach Tep Vong Rd And
Umchhay St Mondal 1 PO BOX 50
Sangkat Svay Dangkum
Siem Reap
171202
Cambodia

Contact Name Contact Tel

: San Kosal
: 855089806388

Account

00006271

Customer Reference

20032584KG

Date

25 Mar 2025

Priority

2

Valid until

: 25 Apr 2025

Priced In

US Dollars

Proforma Invoice MVM155743

EXW Ex Works Viamed, UK * Incoterms(R) 2020

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Your Viamed Contact for this Proforma Invoice : kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110444 Tariff 9019209000 CoO United States	Maxtec Oxygen Sensor MAX-13-250	3	113.00		339.00
0110411 Tariff 9019209000 CoO United States	Maxtec Oxygen Sensor MAX-11	4	130.30		521.20
0110410 Tariff 9019209000 CoO United States	Maxtec Oxygen Sensor MAX-10	4	95.70		382.80
0110022 Tariff 9019209000 CoO United States	Teledyne Oxygen Sensor R-22MED	18	50.80		914.40
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to: DHL a/c 963443487 31 x 31 x 31 cm 3 kg	1	0.00		0.00

Total Net: 2,157.40
Total Vat: 0.00
Total: 2,157.40

Banking details
Bank BIC
Sort Code Barclays Bank
Account Number 20-78-42
IBAN 89771244
BIC GB82BUKB20784289771244
Terms and conditions BUKBGB22
<https://www.viamed.co.uk/terms>

Full proforma amount to be credited to our account net of all bank charges.
Claims: Please claim non delivery within 14 days of invoice.
Shortages or damage within 3 days of receipt.
Claims after these times cannot be entertained.
Title to goods does not pass until payment in full has been received.
Proforma Valid for 30 days only.
Viamed Ltd reserves the right to add an administration fee to the Proforma if multiple changes are requested.